

**EL DORADO COUNTY BOARD OF SUPERVISORS
AGENDA ITEM TRANSMITTAL
Meeting of August 5, 2008**

AGENDA TITLE: TIMESHARE ASSESSMENT AND CONTINGENCY TRANSFER

DEPARTMENT: Auditor-Controller

CONTACT: Joe Harn

DATE: 7/2/2008

PHONE: 5476

DEPT SIGNOFF:

CAO USE ONLY:

DEPARTMENT SUMMARY AND REQUESTED BOARD ACTION:

I am requesting that your Board approve the attached budget transfer for FY 2007/2008 increasing estimated revenues in Operating Transfers In from the Timeshare Assessments Fund in the Auditor, Assessor, and Tax Collector's budgets by a total of \$21,472 and increase the General Fund Appropriation for Contingency by an equal amount .

CAO RECOMMENDATIONS:

Financial impact? Yes () No

BUDGET SUMMARY:

Total Est. Cost \$0.00

Funding

Budgeted _____

New Funding \$21,472.00

Savings _____

Other _____

Total Funding _____

Change in Net County Cost (\$21,472.00)

Funding Source: () Gen Fund () Other

Other:

CAO Office Use Only:

4/5's Vote Required () Yes () No

Change in Policy () Yes () No

New Personnel () Yes () No

CONCURRENCES:

Risk Management

County Counsel

Other

***Explain**

BOARD ACTIONS:

Vote: Unanimous _____ Or

Ayes:

Noes:

Abstentions:

Absent:

Rev. 04/05

I hereby certify that this is a true and correct copy of an action taken and entered into the minutes of the Board of Supervisors

Date: _____

Attest: Cindy Keck, Board of Supervisors Clerk

By: _____



County of El Dorado

OFFICE OF AUDITOR-CONTROLLER

360 FAIR LANE
PLACERVILLE, CALIFORNIA 95667-4193
Phone: (530) 621-5487 Fax: (530) 295-2535

JOE HARN, CPA
Auditor-Controller

BOB TOSCANO
Assistant Auditor-Controller

July 23, 2008

Board of Supervisors
330 Fair Lane
Placerville, California 95667

Subject: Budget Transfer - Contingency and Timeshare Assessment

Agenda Date: August 5, 2008

Dear Board Members:

Recommendation

Approve the attached budget transfer for FY 2007/2008 for \$21,472 from the Timeshare Assessment Fund increasing estimated revenues in the Auditor-Controller's, Assessor's and Tax Collector's budget with an equal increase in Appropriation for Contingency.

Reason for Recommendation

The Timeshare Assessment Fund has earned revenues for FY 2007/2008 in excess of the adopted budget. Those funds reimburse the three departments for the cost associated with timeshare assessment administration. This transfer will increase the estimated revenue for each of the departments, but at this time there is no need to increase departmental appropriations. We therefore are recommending an increase in the Appropriation for Contingency.

Fiscal Impact - There will be an increase to Contingency in the amount of \$24,472.

Action to be Taken Following Approval

Approve the attached budget transfer.

Sincerely,

A handwritten signature in black ink, appearing to read "Joe Harn".

Joe Harn
Auditor-Controller

AUDITOR / CONTROLLER'S USE	
TRANSFER #	28244
DATE	
CODE BY	

EL DORADO COUNTY APPROPRIATION TRANSFER (29130 GOV. CODE)
BUDGET TRANSFER REQUEST # 1

Auditor Controller
 DEPARTMENT OR AGENCY NAME

TO BE COMPLETED BY THE DEPARTMENT	
DOCUMENT TOTAL	85,888
NUMBER OF LINES	7
TRANSACTION CODE TOTAL *	32

DATE

[Signature]
 DEPARTMENT AUTHORIZATION SIGNATURE AND PHONE NUMBER

COMPLETE THE INFORMATION BELOW, WITH JUSTIFICATION NARRATIVE OR ATTACH A MEMO.
 REMOVE THE GOLD COPY AND SUBMIT COMPLETED REQUEST TO THE AUDITOR / CONTROLLER'S OFFICE.
 A BUDGET TRANSFER REQUEST MUST BE AT LEAST TWO LINES, NOT EXCEED TWENTY SIX LINES, AND USE AN "ODD AND EVEN" NUMBERED TRANSACTION CODE *

- * 002 = INCREASE ESTIMATED REVENUE
- * 003 = DECREASE ESTIMATED REVENUE
- * 011 = INCREASE IN APPROPRIATION / BOS APPROVED
- * 012 = DECREASE IN APPROPRIATION / BOS APPROVED

S E R I A L	TRANS CODE NO.	INDEX CODE NUMBER	SUB OBJECT NUMBER	USER CODE NUMBER	AMOUNT	DESCRIPTION (80 CHARACTERS MAX.)
1	002	7703415	0360		9,208	FY07/08 BUDGET REVISION TIMESHARE ASSESSMENTS AND CONTINGENCY INCREASE
2	002	7703415	1310		12,264	
3	011	7703415	7000		21,472	
4	002	031000	2020		2,892	
5	002	040000	2020		5,705	
6	002	050000	2020		12,875	
7	011	151000	7700		21,472	
8						
9						
10						
11						
12						
13						

REVIEWED FOR FORMAT BY *[Signature]* JOE HARN, C.P.A. AUDITOR / CONTROLLER
 DATE 7/23/08

APPROVED AND SO ORDERED THAT THE ABOVE TRANSFERS BE MADE (AS REQUESTED OR AMENDED) AND INCORPORATED IN THE MINUTES OF THIS MEETING OF THE BOARD OF SUPERVISORS OF THE COUNTY OF EL DORADO

 CHIEF ADMINISTRATIVE OFFICE - ANALYST DATE

 CHIEF ADMINISTRATIVE OFFICE DATE

 SIGNATURE: CHAIRMAN, BOARD OF SUPERVISORS DATE

 ATTEST: CLERK, BOARD OF SUPERVISORS